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Please type a plus sign (+) inside this box -> +		PTO/SB/21 (08-00) se through 10/31/2002. OMB 0651-0031 e: U.S. DEPARTMENT OF COMMERCE →	⊢
(Application Number	09/483,537	
TRANSMITTAL	Filing Date	January 14, 2000	
FORM	First Named Inventor	Robert D. Wilson	
(to be used for all correspondence after initial filing)	Group Art Unit	2164	
	Examiner Name	James S. Bergin	
Total Number of Pages in This Submission 4	Attorney Docket Number	BLO1565-002 fka BLO1134-014	
ENCLO	SURES (check all that app	ly)	
	nent Papers Application)	After Allowance Communication to Group	
Fee Attached Drawing	· · · · · · · · · · · · · · · · · · ·	Appeal Communication to Board of Appeals and Interferences	
Amendment / Reply Licensi	ng-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
After Final Petition	۱	Proprietary Information	
7637	to Convert to a	Status Letter	
Power	of Attorney, Revocation e of Correspondence	Other Enclosure(s) (please identify below):	Į
	al Disclaimer	RCE Transmittal PTO/SB/30	
Information Disclosure Statement Reques	st for Refund	RECEIV	/ED
Certified Copy of Priority CD, Nu	mber of CD(s)	APR 0.1	2002
Document(s) Remarks Response to Missing Parts/		_	
Incomplete Application		Technology Ce	nter 210
Response to Missing Parts under 37 CFR 1.52 or 1.53			
SIGNATURE OF APPL	ICANT, ATTORNEY, OR A	AGENT	
Firm or Individual name Jeffrey S. Standley	- M		
Signature	and By		
Date March 6, 2002	0		i
CERTIFIC	ATE OF MAILING		1
I hereby certify that this correspondence is being deposenvelope addressed to: Commissioner for Patents, Wa			
Typed or printed name Sheri L. Burke			
Signature Show X	Burke Date	March /8, 2002)

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PTO/SB/17 (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

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TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT	DUNT OF PAYMENT
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(\$)	1	,660.	.00

	The transfer of the control frame
C	omplete if Known
Application Number	09/483,537
Filing Date	January 14, 2000
First Named Inventor	Robert D. Wilson
Examiner Name	James S. Bergin
Group Art Unit	2164
Attorney Docket No.	BLO1565-002 fka BLO1134-014

METHOD OF PAYMENT (check one)	FEE CALC	ULATION (continued)	
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3.ADDITIONAL FEES		
indicated fees and credit any overpayments to: Deposit	Large Entity Small Entity		
Account Number 19-4076	Fee Fee Fee Code (\$)	Fee Description Fee Paid	
Deposit	105 130 205 65 Surcharge	- late filing fee or oath	
Account	127 50 227 25 Surcharge	- late provisional filing fee or cover	
Name L		sh specification	
	147 2520 147 2520 For filing a	request for ex parte reexamination	
Applicant claims small entity status. See 37 CFR 1.27		g publication of SIR prior to Examiner	
2. X Payment Enclosed:	Action		
Check Credit card Money Other	113 1840* 113 1840* Requesting	g publication of SIR after Examiner	
— Older —	115 110 215 55 Extension	for reply within first month	
FEE CALCULATION	116 390 216 195 Extension	for reply within second month	
1. BASIC FILING FEE Large Entity Small Entity	117 890 217 445 Extension	for reply within third month 920.00	
Foo Foo Foo Foo	118 1390 218 695 Extension	for reply within fourth month	
Code (\$) Code (\$) Fee Description Fee Paid	128 1890 228 945 Extension	for reply within fifth month	
	119 310 219 155 Notice of A	Appeal Proposition of the Propos	
106 320 206 160 Design filing fee	120 310 220 155 Filing a bri	ef in support of an appeal	
107 490 207 245 Plant filing fee 108 710 208 355 Reissue filing fee		or oral hearing	
114 150 214 75 Provisional filing fee	138 1510 138 1510 Petition to	institute a public use proceedin RECEIVE D	
114 150 214 75 Provisional filling fee		revive - unavoidable	
SUBTOTAL (1) (\$) 0.00	141 1240 241 620 Petition to	revive - unintentional APR 0. 1 2002	
2. EXTRA CLAIM FEES	142 1240 242 620 Utility issue	e fee (or reissue)	
Extra Fee from Claims below Fee Paid	143 440 243 220 Design iss	10011110137	
Total Claims -20 ** = X =	144 600 244 300 Plant issue		
Independent Claims -3 ** = x =	122 130 122 130 Petitions to	o the Commissioner	
Mutiple Dependent =	123 50 123 50 Petitions re	elated to provisional applications	
** or number previously paid, if greater; For Reissues, see below	126 180 126 180 Submissio	n of Information Disclosure Stmt.	
Large Entity Small Entity		each patent assignment per property her of properties)	
Fee		bmission after final rejection (37 CFR	
102 80 202 40 Independent claims in excess of 3		For each additional invention to be examined	
104 270 204 135 Multiple dependent claims, if not paid		rection 1.129(b)) or Continued Examination (RCE)	
109 80 209 40 ** Reissue independent claims over original			
patent 110 18 210 9 ** Reissue claims in excess of 20 and over	169 900 169 900 Request for expedited examination of a design application		
original patent	Other fee (specify):		
SUBTOTAL (2) (\$)0.00	* Reduced by Basic Filing Fee Paid	SUBTOTAL (3) (\$)1,660.00	
SUBMITTED BY		Complete (if applicable)	
Name (Print/Type) Jeffrey S. Standley	Registration No. (Adoptey/Agent) 34,021	Telephone 614-792-5555	
Signature Scientific	(Argopreyurgent) 197,021	Date March 4 2002	